

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Mijente PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00738039
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Colectiva Colibri</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>12 / 02 / 2022</b>
Mailing Address <b>4514 Chamblee Dunwoody Rd Ste 453</b>		Amount <b>100000.00</b>
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30338-6272</b>
Purpose of Expenditure Non-Contribution Account: Canvassing Services		Category/Type
Name of Federal Candidate <b>Warnock, Raphael, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Run-off General</b>
		250000.00

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure		Category/Type
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose
Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>100000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>100000.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Stanger, Howie, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**12 / 03 / 2022**

Signature